

**UNITED STATES DISTRICT COURT  
NORTHERN DISTRICT OF OHIO  
WESTERN DIVISION**

**UNITED STATES OF AMERICA,**

Case No. 3:22-CR-274

Plaintiff,

JUDGE KNEPP

**-vs-**

**AMANDA HOVANEC,**

Defendant.

**NOTICE OF APPEAL**

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Attorneys for Defendant Amanda Hovanec

Now comes Defendant Amanda Hovanec, through counsel, who gives notice of her appeal to the United States Court of Appeals, Sixth Appellate Circuit, from the decision rendered by this Court on 3 October 2024. Ms. Hovanec is indigent. A CJA23 Financial Affidavit is attached.

Respectfully Submitted,

/s/ David Klucas

David Klucas

/s/ Kenneth Bailey

Attorneys for Defendant Amanda Hovanec

**Certification**

This shall certify that a copy of the forgoing was sent this 14<sup>th</sup> day of October, 2024, to all counsel of record via the Court's Electronic Notification and Filing System.

/s/ David Klucas

David Klucas

CJA 23  
(Rev. 11/11)**FINANCIAL AFFIDAVIT**

IN SUPPORT OF REQUEST FOR ATTORNEY, EXPERT, OR OTHER SERVICES WITHOUT PAYMENT OF FEE

IN THE UNITED STATES DISTRICT COURT  COURT OF APPEALS  OTHER (Specify below)

IN THE CASE OF

U.S.A. v. *Amber Havanc*

FOR

AT

*Northern District of Ohio*  
*Toledo, Ohio*

LOCATION NUMBER

DOCKET NUMBERS

Magistrate Judge

District Court

3:22cr274

Court of Appeals

PERSON REPRESENTED (Show your full name)

*Amber Havanc*

- 1  Defendant - Adult  
 2  Defendant - Juvenile  
 3  Appellant  
 4  Probation Violator  
 5  Supervised Release Violator  
 6  Habeas Petitioner  
 7  2255 Petitioner  
 8  Material Witness  
 9  Other (Specify) \_\_\_\_\_

CHARGE/OFFENSE (describe if applicable &amp; check box →)

Conspiracy to Import A Controlled Substance Resulting in Death or Serious Bodily Harm

 Felony Misdemeanor**ANSWERS TO QUESTIONS REGARDING ABILITY TO PAY**

EMPLOY- MENT	Are you now employed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Self-Employed				
	Name and address of employer: _____				
	IF YES, how much do you earn per month? \$ _____	IF NO, give month and year of last employment? _____ How much did you earn per month? \$ _____			
	If married, is your spouse employed? <input type="checkbox"/> Yes <input type="checkbox"/> No				
IF YES, how much does your spouse earn per month? \$ _____	If you are a minor under age 21, what is the approximate monthly income of your parent(s) or guardian(s)? \$ _____				
INCOME & ASSETS	Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
	OTHER INCOME	RECEIVED	SOURCES		
	IF YES, give the amount \$ _____ received and identify the \$ _____ sources \$ _____	_____			
CASH	Do you have any cash on hand or money in savings or checking accounts? <input type="checkbox"/> Yes <input type="checkbox"/> No IF YES, total amount? \$ _____				
PROP- ERTY	Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
	IF YES, give value and description for each \$ _____ \$ _____ \$ _____	VALUE	DESCRIPTION		
OBLIGATIONS & DEBTS	DEPENDENTS	MARITAL STATUS Single _____ Married _____ Widowed _____ Separated or Divorced _____	Total No. of Dependents _____	List persons you actually support and your relationship to them _____	
	DEBTS & MONTHLY BILLS (rent, utilities, loans, charge accounts, etc.)	N/A	DESCRIPTION	TOTAL DEBT \$ 0 \$ 0 \$ 0 \$ 0	MONTHLY PAYMENT \$ 0 \$ 0 \$ 0 \$ 0

I certify under penalty of perjury that the foregoing is true and correct.

SIGNATURE OF DEFENDANT  
(OR PERSON REPRESENTED)

10-6-24

Date